



The Stethoscope

News of the COLUMBIA-PRESBYTERIAN MEDICAL CENTER

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NOVEMBER 1975

New Plasma Substitute Developed Of Crucial Significance for Burns

A microbiologist at Columbia-Presbyterian has developed a new plasma substitute which reduces life-threatening side effects in the critical first steps of burn therapy.

Dr. Charles L. Fox Jr., Professor of Microbiology in the Department of Surgery, P&S, has reported finding the "optimal" mix of ingredients for use in treating severely burned accident victims. It marks a new direction in the formulation of such solutions because of its high concentration of sodium.

The solution helps restore sodium to proper levels in the body without causing dangerous cell dehydration or swell-

ing, two potentially fatal side effects associated with current treatments. Burned cells and tissues disrupt the body's normal balance of sodium and water; restoring the proper balance is the crucial initial therapy for burn patients.

Dr. Fox's formula is a departure from dilute (hypotonic) saline solutions commonly used in hospitals. Doctors have been cautious about concentrated solutions, fearing they would cause cellular dehydration. But the P&S scientist reports that his formula, which has more sodium than found in normal body fluid, produces a "beneficial degree" of dehydration.

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No Life of Ease for Dr. C. R. Wise: He Goes on to Meet New Challenges

On Thursday, May 22, more than 150 employees who served under Dr. Carl R. Wise, Assistant Vice President for Professional Services to Patients, met in Harkness Hall to give their boss a retirement party, greeting him with a larger-than-life photograph, showing him in action (see photograph). On the following day, it was learned that Dr. Wise had been asked to stay on until the end of October.

On October 28, The Department of Pathology, Columbia University, gave Dr. Wise a black tie dinner party, hosted by Dr. Donald W. King, at the University Club.

Dr. Wise's retirement from Presbyterian Hospital, there-

fore, became official October 31, but many of us who know him well suspected that he was not about to lay aside his stethoscope and prescription pad and fade slowly away into a life of ease. Such doubts were more than justified, because on November 1, Dr. Wise assumed his new responsibilities as medical director of the Westchester Health Maintenance Organization, now almost ready to become operative as a center for prepaid health services to serve industry, unions and families throughout the area. All of his employees, colleagues and many friends wish him the very best in his new undertaking, cer-

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Dr. Wise may be asking guests at his retirement party whether they prefer him with pipe or with libation.

Telephone Cutover Slated Next Month

More than 3,700 marriages will be performed at Columbia-Presbyterian Medical Center next month.

Some of the best men in attendance will be outfitted with walkie-talkies, and the cere-

mony will take place not in the Pauline A. Hartford Memorial Chapel but in a small room in the Service Building.

There, on the night of Friday, the 12th of December, and the early morning hours of

Congestion Cut in VC Emergency By Use of Triage Desk in Lobby



Closeup of the triage desk before the shift begins: Ms. Mary Moran, medical nurse practitioner, is flanked by Mrs. Nydia Lugo, left, and Rose Dauria.

On October 1, a new arrangement of services, designed for the improved use of space, manpower, and electronic data processing technology, was effected in the lobby of Vanderbilt Clinic.

The new arrangement changes the flow pattern of patients who come to Vanderbilt Clinic without appointments. On weekdays from 8:30 a.m. to 4:30 p.m. such patients no longer go first to Area B for screening and processing. This eliminates in the medical emergency area the congestion due to the large numbers of patients seeking clinic appointments and general information along with those who have come for immediate medical attention.

Instead, all patients without appointments proceed to the triage desk on their immediate left as they enter from Broadway. Personnel who have relocated from Area B staff this desk, which is divided into three stations.

At station 1, a receptionist
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Anatomy Chairman Named by P&S

Dr. Michael D. Gershon has been appointed Chairman of the Department of Anatomy and Professor of Anatomy, P&S. The appointment, announced by Dr. Donald F. Tapley, Dean of P&S, was effective October 1.

Dr. Gershon was graduated from Cornell University and Cornell University Medical College with many academic distinctions and became Associate Professor of Anatomy at the Medical College in 1969 and Professor of Anatomy in June 1975. He was a research associate in the Department of Pharmacology at Oxford University in 1965-66 and a Marke Foundation Scholar in Academic Medicine.

Dr. Gershon's research focuses on the neural control of gastrointestinal activity, the role of neurochemical substances in controlling the electrical activity of the brain during the rapid eye movement phase of sleep, and the possible auto-toxic effect of the sym-

December 13, 3,700 telephone extensions will be, in electrical engineering parlance, "married" to new numbers integrated by a computer in a central office of the New York Telephone Company at 146th Street and Convent Avenue. A new telephone exchange—694—has been created for the growing needs of Columbia-Presbyterian, a city within a city with 10,000 employees, staff, students and patients.

The mass ceremony, carried out with all due speed to minimize interruptions in telephone service, will complete the switchover of the Medical Center's telephone facility to a new computerized switching system, announced in the March 1975 Stethoscope by G. R. Masten, Vice President (Non-Professional Services), PH, and James Kiernan, Superintendent of Services.

Existing Medical Center extensions will be disconnected from the switchboard presently in use and the Electronic Switching System will be connected to the new terminals by a team of specialists. Several

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Dr. Michael D. Gershon

pathetic nervous system on the heart.

"We are pleased to welcome Dr. Gershon, commend his scholarship and administrative abilities and look forward to his leadership of the department," said Dean Tapley, in announcing the appointment.

Dr. Gershon replaces Dr. Charles R. Noback, Acting Chairman of the Department for the past year.

New Director Appointed at Center For Community Health Systems

Dr. Robert J. Weiss, nationally known psychiatrist, health services administrator and governmental advisor, has assumed his new positions as Director of the Columbia University Center for Community Health Systems and Professor of Psychiatry and Social Medicine, according to an announcement by Dr. Donald F. Tapley, Dean of P&S. The Center, an interdisciplinary facility established in 1972 to identify and respond to specific health care problems of both consumers and providers, was under the leadership of Acting Director Dr. Allen S. Ginsberg.

An alumnus of P&S, Dr. Weiss was associated with various divisions of Columbia-Presbyterian Medical Center from 1951 until his appointment as Professor of Psychiatry and Chairman of the Department of Psychiatry at Dartmouth Medical School in 1959. He became Associate Director of the Harvard Center for Community Health and Medical Care and Associate Dean of Health Care Planning

at Harvard Medical School in 1970, and held these positions until his recent appointment at Columbia.

Dr. Weiss received the Bicentennial Medal of the College of Physicians and Surgeons in 1967. He has been active in planning mental health care for the state of New Hampshire and, as a member of committees of the National Institutes of Health, the American Psychiatric Association, and the Association of American Medical Colleges, he has had a prominent role in evaluating and designing health care services on a national level. His other key committee memberships include the Health Services Committee of the A.A.M.C. (Chairman of the Sub-Committee on Quality of Care), the Advisory Panel on National Health Insurance to the Sub-Committee on Health of the House Ways and Means Committee and the Advisory Committee of the Social Security Study of the National Academy of Sciences, Institute of Medicine.

Congestion Cut . . .

Continued from page one

dispenses information. A sign in English and Spanish hanging directly overhead identifies this function. This staff member initiates the processing of new patients by imprinting triage referral cards and referring patients to the medical nurse practitioner at station 2.

The nurse practitioner (two during peak periods) classifies patients as either "emergent"—needing immediate attention in Emergency Areas A or B, whose administrative processing will be done by a registrar after treatment; "urgent"—to have administrative processing first and receive medical treatment later that same day; or "non-urgent"—to have administrative processing and either to be seen on the same day or be given a future appointment at a particular clinic.

At the lobby triage desk the nurse practitioner does not perform the simple diagnostic procedures (such as taking blood pressure) which are done in the traditional screening process at Area B. Waiting time for patients in all three classifications is trimmed when they receive basic diagnostic evaluation in their ultimate treatment area.

The nurse practitioner completes the patient's triage referral card. She refers the patient to the appropriate treatment or administrative area, and orders certain tests at her discretion.

At station 3 of the triage desk a clerical staff member aids the nurse practitioner by using a data bank terminal to

order records for treatment areas and to check information (as in Medicaid cases). The staffer imprints test requisitions, generates visit tickets, directs patients to administrative and treatment areas when appropriate, and gathers data for statistical purposes.

A sign in English and Spanish hangs overhead stations 2 and 3, identifying them for emergencies and patients without appointments.

Patients who are classified to be treated later that day or receive an appointment at a particular clinic for a later date, are guided by a dark brown line to Area R at the extreme right past the first corner from the Broadway entrance. At Area R, registrars perform such administrative tasks as embossing new clinic plates, clearing new applications, constructing new charts, generating visit tickets and referring patients to their treatment areas.

These personnel are relocated from booths 8 to 11 of Area R, which residents, interns, nurse practitioners and medical students who are otherwise at freestanding desks use at this time.

The triage system of Emergency Area A (trauma) remains unchanged, although patients may be referred to this area from the lobby triage desk during the course of a day.

Plans are underway to extend the hours of the new system for the convenience of patients who must come to Vanderbilt Clinic in the evening.

No Life of Ease For Dr. Wise...

Continued from page one

tain in the knowledge that he will fulfill his responsibilities above and beyond the call of duty, and that in about 10 years we'll all be invited to his next retirement party.

Dr. Wise is a native of Charleston, West Virginia, graduated from the University of West Virginia, and received the M.D. degree from the Harvard Medical School in 1932. He completed his internship and residency in medicine at The Presbyterian Hospital in the City of New York between 1933 and 1937, and was appointed assistant in medicine at the College of Physicians and Surgeons in 1935 and assistant physician at the Hospital in 1937.

During World War II, Dr. Wise rose from Captain to Lieutenant Colonel in the U.S. Army Medical Corps, serving first with the 2nd General Hospital, staffed with many doctors, nurses and personnel from Presbyterian, then had specific assignments as Chief of Medicine at the 94th General Hospital, and as regional consultant in dermatology and regional consultant in internal medicine.

Following the war, Dr. Wise returned to private practice and resumed his duties at Presbyterian Hospital and at P&S. In 1948, he was appointed medical officer at Columbia University, serving at the Morningside Campus. On January 1, 1961, Dr. Wise was appointed Assistant Vice President for Professional Services to Patients, PH.

Most Unforgettable Patient

When asked about his most interesting patient throughout his long years of practice, Dr. Wise told the following story:

When he was in private practice with Dr. Ralph H. Boots, long associated with the Medical Center, he was the younger colleague who got most of the late night calls. One morning, at 2:00 a.m., a call came from Dr. Boots, telling him that his friend John North had just called, and they had a very sick patient at Madison Square Garden, and that Dr. Wise should get there quickly.

North, of course, was president of Ringling Brothers Circus, then at the Garden.

When Dr. Wise arrived at 2:30 a.m., North, the menagerie boss, the vet and other top people of the circus were anxiously awaiting his arrival. These men led Dr. Wise to the patient, who was the star attraction of the circus: Gargantua, the gorilla, whose home was a large glass-enclosed air-conditioned cage.

"Ach, poor baby," the German menagerie boss and keeper of Gargantua said, "I haff a bad colt and gave to

him. He is sick now for three days, poor boy, and tonight he got pneumonia." When asked how he knew that, the man said, "The vet told me." When asked why the vet did not treat him, the keeper was indignant. "We won't have no vet treating Baby. He's more human than animal."

Dr. Wise followed the keeper up a narrow ladder and into the cage through a trap door and was relieved to see that Gargantua's home was divided into a small bedroom and a large living-viewing room, separated by a barrier of iron bars. The patient was lying on his bed, wearing the disconsolate expression of all cold sufferers.

A Gargantuan Cold

"Seeing the bars between us, I approached the patient with more confidence," Dr. Wise said, "opened my bag, then observed the patient, he was a massive pile of black fur, looked to be three feet wide across the shoulders and appeared to be very ill indeed. His hands were most unexpected. The hair came down only to the base of his nails, but his fingers were very human in size and shape and his palms were creased with enough lines to please any fortune teller. He occasionally wiped at his nose with his hand and said nothing. I did the physical examination, omitting all except that of counting his respirations, which were 28 a minute. I knew only one fact about the big apes: they usually die of pneumonia or tuberculosis. Without an x-ray or thermometer reading of his temperature, I decided to accept the vet's diagnosis and treat for pneumonia and a sluggish bowel. A call was put in for oxygen tanks. The patient weighed 500 pounds, so the dosage of sulfapyridine was calculated by weight, calling for a dosage four times that of an average human, but how to give it to him? The keeper said, 'He loves milk,' so he got his medicine in milk every four hours, then three bottles of citrate of magnesia, which he seemed to like."

The next afternoon Dr. Wise, Dr. Boots and Dr. Yale Kneeland Jr., a world authority on upper-respiratory infections

from Columbia-Presbyterian, went up the ladder to hold a consultation. The physical examination again omitted everything except the respiration count, which was still 28 a minute.

"We doctors squatted in the cage on our haunches, discussing the case, then looked around to find that the circus tables had been turned. There watching us with complete fascination were all the freaks of the circus—the tall man, the fat lady, the midgets, the tiger lady—and the trapeze artists. We suddenly knew how Gargantua must have felt as an entertainer. We came quickly down from the cage, feeling self-conscious, to find the Germain keeper still mournful.

"He iss much better, poor boy, but still his bowels do not move," he said."

Four additional bottles of citrate were prescribed. The keeper called Dr. Wise early next morning. "The citrate, it has worked, Doctor, ach Gott, how it has worked, but he iss getting well! This morning, he was pulling at the bars and threw his milk and medicine at me."

Gargantua made an unevenful recovery, to the satisfaction of his doctors, his keeper and all his many colleagues at the circus.

In his new undertaking, Dr. Wise's office will be only minutes away from his home in Katonah. We know he will keep busy and successfully treat many more grateful patients.

MILBANK LIBRARY PRE HOLIDAY SALE

"To all who have waited patiently for the big event of the book season," the Milbank Library announces its annual book sale.

The sale will start December 8 (with 14 shopping days left until Christmas). There will be "books on all subjects for both young and old, at pre-inflationary prices," the announcement said.

Medical Centerites are invited to come up to PH-20 and browse during the library's regular hours, weekdays from 9:00 a.m. to 5:30 p.m.

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Telephone Cutover ...

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of the New York Telephone Company's best technicians with two-way radios will stand by in critical Medical Center areas to guarantee the integrity of internal communications during the momentary period of telephone cutover.

The main difference in the physical plant will be that the functions of the mechanical switching equipment currently connected to the Medical Center's console switchboard will be absorbed by a computer-type electronic switching system located in the Convent Avenue Office of the New York Telephone Company. The "frame room" on the second floor of the Service Building has been designed for much-needed expansion of the Hospital's Information Systems Department. The Medical Center Communications Center remaining in the Service Building will continue to be responsible for operation of the switchboard consoles, patient information center, Doctor's Page System and Doctor's Answering Service.

At present, wiremen have grafted onto each extension an inactive line leading to the new frame. On the Night of the Switchover, the lines will be connected to the new frame, which has terminals corresponding to the new numbers of the "694" exchange.

"If you hear clicking sounds on the phone these days, it may not be an indication of trouble in the line," said Mr. Kiernan. "The sounds may mean that your conductors are being rerouted."

Following the switchover, Mr. Kiernan said, there will be time over the weekend for "review and troubleshooting." He urged all extension users to report problems to the Communications Center (extension 3301).

"Initial kinks in the system are unavoidable in a large-scale switchover such as this," he stressed.

Anyone dialing the old medical center numbers will be transferred to the new extension by a telephone company representative and advised of the new number. Mr. Kiernan stressed that members of the Medical Center community assigned extensions 3400-4199 and 6400-6999 in the new system should expect a new inside dial tone "much like the present outside dial tone."

In order to familiarize the Medical Center staff with the operation of the new system, training sessions will be conducted by The New York Telephone Company in the Alumni Auditorium. The dates of these training sessions will be announced in the near future.

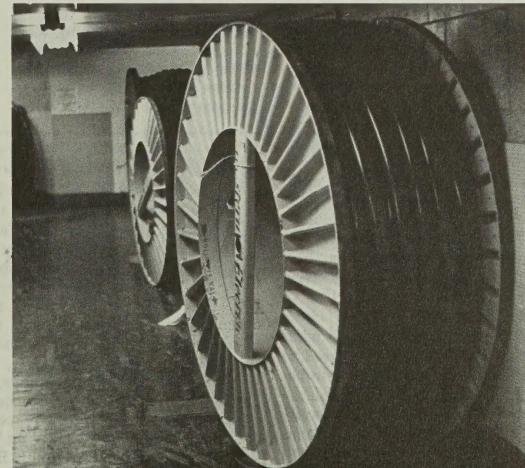
Mr. Masten said the cutover to the new Electronic Switching System is necessitated by the Medical Center's needs for

additional telephone service and provision for future growth. At the same time it gains the most modern improvement in telephone service and releases highly valuable space in the Service Building. The Centrex System installed in 1962 was adequate for the ensuing years, but the tremendous growth in Hospital and University requirements, provision of telephones to patients, reporting to Government and third party agencies, expanded activities of the Professional Staff and the addition of new buildings has consumed the established reserve telephone lines. The new installation allows expansion from the existing 4,200 lines to a total of 10,000.

"It is imperative that we provide these improved facilities and the associated reserves so that communications at the Medical Center may keep pace with expanding responsibilities and scientific advances," Mr. Masten declared.



James Kiernan, Superintendent of Services (center) checks work in progress in the frame room.



This heavy telephone cable will be conveying your messages beginning December 13.

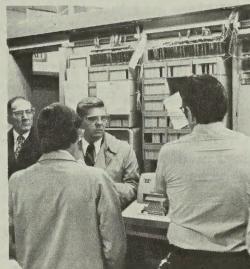
New Plasma Substitute Developed for Burns...

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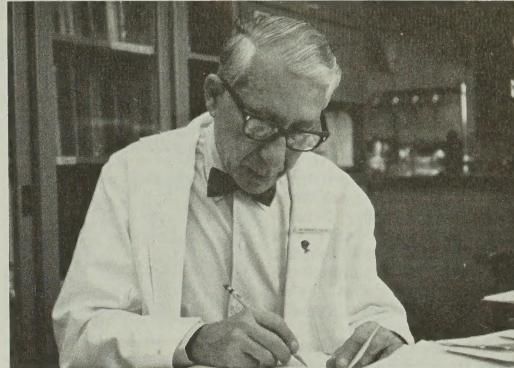
just enough to prevent edema, or tissue swelling, without causing ill effects of its own.

Using a concentrated plasma substitute, Dr. Fox found, less water is absorbed by the body's tissues. Less water means less chance of edema, which can interfere with breathing, kidney function and blood circulation, he said.

His findings are based on



Messrs. G. R. Masten and James Kiernan (left to right, facing camera) inspect new telephone facility downtown of Medical Center.



Dr. Charles L. Fox Jr.

more than 3,000 laboratory tests on mice which, for the first time, compared the efficacy of the entire range of salt solutions from very dilute to very concentrated. They are reported in a recent issue of International Surgery.

Arriving at the optimal formula for synthetic body fluids has been difficult because of problems associated with evaluating them in human patients. "For comparative purposes," Dr. Fox said in an interview, "you obviously can't treat the same patient twice with two different solutions, or find two identically burned persons and treat each one with a different formula."

Dr. Fox's solution contains the optimal mix of sodium, chloride and water. His experiments demonstrated that best results are obtained with a slightly concentrated solution with a 1.4:1 sodium to chloride ratio. A pharmaceutical manufacturer is preparing the formula for large-scale clinical trials, and a patent has been applied for.

In certain respects, Dr. Fox

explained, his solution is better than actual blood plasma. It can be prepared synthetically in large, inexpensive batches free of contaminants, has an indefinite shelf life and, since it contains no protein, is non-allergenic. Actual plasma, in contrast, is expensive to collect and process, can harbor infectious agents and has a limited storage life.

According to Dr. Fox, Dr. William W. Monaflo of St. Mary's Hospital in St. Louis has administered the new formula successfully to more than 100 burn patients. Dr. Fred T. Caldwell, Professor of Surgery at the University of Arkansas Medical Center in Little Rock, has had similar experiences with the plasma substitute. "It's working beautifully," Dr. Fox said, "completely eliminating the need for blood plasma transfusions in these cases."

In addition to its use as a plasma substitute in burn therapy, Dr. Fox said, the solution is under study for use in the treatment of hemorrhagic and traumatic shock.

Improvements to Come

Here is a summary of the main features of the new system, to take effect December 13:

- 1) No more outside dial tone: Dial "9", followed immediately by the number you are calling.
- 2) No need to wait for operator to transfer a call: Depress the receiver button, wait for a "stutter" tone and then dial the extension to which the party is to be transferred. The dialed number will ring almost instantaneously.
- 3) Consultation hold: Depress the receiver button, wait for "stutter" tone and then dial a third party. After consultation with third party is completed, reconnect with the original party by again pressing the receiver button.
- 4) Three-way conference calling: Depress the receiver button once, listen for stutter tone, dial third party. Upon being connected with it, depress the receiver button again, establishing three-way conversation.
- 5) New tie lines: Bard Hall-119; downtown campus-115; Psychiatric Institute-116; International Institute for the Study of Human Reproduction-118.
- 6) Forwarding calls: As with the doctors' answering service, extensions can be programmed to forward unanswered incoming calls to other extensions after a short interval. Call Communications Center for more information on this.

Purgatory for Germs in PH Basement Prepares Their Oblivion

Bacillus stearothermophilus, prepare to meet your doom.

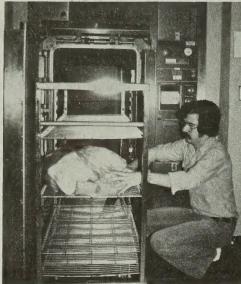
That goes for you, too, *B. subtilis*, *B. pseudomomas*, and a host of other nasty things crouching on that surgical linen brought over to the Sterile Supplies Department this morning. That good washing by the Laundry Department may have destroyed *staphylococcus* and *E. coli*, but not you. You may think all the danger is past and you're on your way to the operating room—but guess again.

The aim of the Sterile Supplies Department has always been to provide materials for the Medical Center that are free of harmful microorganisms. But the ways to achieve this have changed greatly, as William Rosal will tell you. Shortly before his retirement on September 1, The Stethoscope opened the dark wooden door in the PH basement and was rewarded by a tour through the brightly lit interior by Mr. Rosal. At that time he was assistant to the supervisor, Mrs. Alice Wiacek.

The Autoclave Tapes

"See how we're wrapping linens in muslin? They're going into the autoclaves to be sterilized." We stare at a piece of what looks like masking tape being torn off and stuck on the middle of every pack. "That's special autoclave tape." Mr. Rosal points to a pile of packs that have come out of the autoclave and are ready to be sent in carts to their destinations. "Those diagonal lines on the tape have turned black. If they remained light yellow, we'd know the packs hadn't been sterilized and the machine was in need of repairs."

Mr. Rosal takes us over to the autoclave, kind of the big daddy of pressure cookers, since it does its hot work under the pressure of steam. Not far away is the new machine in the neighborhood, the gas sterilizer. As opposed to its steamed-up friend, which does most of its work at 270° F (slightly lower for certain solutions) an average of 45 minutes, the gas



Plastic materials get their turn as Bob Acito, assistant supervisor, readies bundle for gas sterilizer.

sterilizer works much more slowly and at a lower temperature, 115° F for six hours. This machine sterilizes plastic equipment that would melt under the other process.

The department sterilizes from three to four hundred items a day, most of which are surgical linens.

The Laundry Department washes the used linens, then sends them by cart over here so the rest of the germs will be destroyed. Sterile Supplies Department sends the items, folded and wrapped in packs of varying multiples, back to the surgical areas, which also receive from the department special major and minor packs.

The department is responsible for processing and distributing most sterile supplies that manufacturers send to the hospital, some of which end up in the surgical packs, along with linens washed and sterilized after each use.

A Major Difference

A minor pack contains 20 dressing towels, two laparotomy sheets, besides dressings and other special linens. A major pack adds intestinal sponges, large abdominal dressings, and special 3" x 3" Raytec gauze.

The neurological surgical area also receives major and minor packs. It receives gown packs which contain absorbent cotton cut to specification. The department receives this cotton in bulk and must cut and

sterilize the pieces by hand.

"We used to do everything by hand," said Mr. Rosal, who stepped into the department over 30 years ago after starting with the hospital in 1941 as a kitchen worker, then experiencing the ups and downs of an elevator operator. "Years ago most supplies had to be routinely sterilized after they came from the manufacturer, and since most items were not disposable, they were sterilized again and again until they became too worn for use."

Taking a Powder

A case in point was gloves. Over a thousand were sterilized a day. To make certain none had holes, a worker would place each glove against an air pipe filled with powder. And if some of the gloves had to fall by the wayside, it was up to the men and women in Sterile Supplies to make sure there were enough right-hand gloves to go around with the left, and vice-versa.

And there was at least one hapless doctor in the house who developed a rash each time



Truckman Rodney Billeter (left) attaches autoclave tape after he folds pack of gowns washed and sent by Laundry Department to be sterilized. Mrs. Alice Wiacek, supervisor, observes as truckman Wilbur Rice removes supplies from laundry cart.

sterilized." The drums were 18 inch tall containers with handles, and had holes punched around the side. "You should have seen some of our smaller girls pack gowns or dressings into these drums, which we piled as high as the ceiling.

A Special Ink

"To see that the autoclave was working properly, we'd cut out a little piece of paper and stamp the word STERILE on it with a special chemical we'd get from the pharmacy. We'd put the tag inside a drum. If



Seated, from left, are Mmes. Geneva Moore, Delia Amadeo and Vera Quinn, aides. Flanking Mrs. Georgia Pappas, volunteer, in the background are aides Mmes. Mary Morelli (left) and Lillie Sowell.

side, would be loaded onto the carts in order of what areas would be reached during delivery.

Today there are more points to deliver materials, but fortunately the muslin packs are light and uncumbersome.

The inventory for each department during the work week is taped to a post and the orders rechecked each time.

The Sterile Supplies Department looks forward to even more efficient and convenient methods of providing germ-free materials, both from the standpoint of autoclave design and more prepackaged supplies.

And who knows that by the year 2001 all those wretched, scraggly germs may finally get the idea and float quietly out to oblivion as soon as they realize that they are within the borders of Presbyterian Hospital?

Columbia-Presbyterian Medical Center Is People...

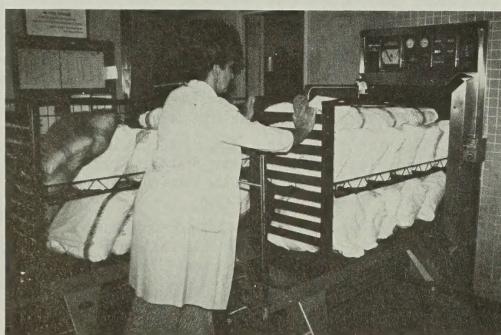
he pulled the latex gloves on, necessitating an intensive hunt for ones made of kindlier material. Today that same doctor probably grins with glee each time he slips on a clear plastic glove, interchangeable with either hand, commercially pre-sterilized and designed to be used only once.

Examples of other items that now come presterilized are dressings for post-operative patients, and abdominal pads.

There are commercial products the department does sterilize and wrap by hand that years ago it also had to make by hand. Workers had to shape intestinal sponges, nicknamed "peanuts," by twisting strips of gauze into small balls.

"And the autoclaves! They weren't automatic. Had to watch the clock. Open, close, stop them by hand. And what now takes 45 minutes used to take two hours to complete because they couldn't reach as high a temperature as today.

"How huge they were. Muslin packs hadn't come into practice yet. Big copper drums held all the supplies to be



"In you go!" Joan Craven, assistant to the supervisor, loads steam sterilizer. Note cart at left with cooling packs whose autoclave tape stripes have darkened in the sterilization process.

Nobel Winner in Cartwright Lecture

Nobel laureate Charles B. Huggins will give the twenty-first Cartwright Lecture of the College of Physicians and Surgeons at 4:00 p.m. on Wednesday, November 19 in the Alumni Auditorium. His topic will be "Cell Surface Control of Gene Expression: Solid State Biochemistry."

Dr. Huggins and Dr. Peyton Rous were awarded the Nobel Prize for physiology and medicine in 1966 for investigations which were at the forefront of research on chemotherapy in the treatment of cancer.

The Cartwright Lectures, instituted in the late 1870's, were intended to be auspicious occasions for the presentation of new advances or the summarization of existing knowledge by a highly respected professor or physician. They were suspended during World War I and reinstated in 1974, when Dr. Paul B. Beeson, Nuffield Professor of Clinical Medicine at Oxford University, was the lecturer.

A Symposium Of Interest To Volunteers Slated Here

The Department of Psychiatry, P&S; the School of Public Health, CU; the Department of Volunteer Services of the New York State Psychiatric Institute; the Cancer Research Center of Columbia; and the Foundation of Thanatology will co-sponsor a Symposium on "The Role of the Volunteer and Volunteer Director in the Care of the Terminal Patient and the Family" on Friday and Saturday, November 7 and 8, at Maxwell Hall. Each day's program will begin at 8:00 a.m. and will include keynote addresses, workshops, and a concluding Dutch treat cocktail hour at approximately 4:30 p.m. Please call The Foundation of Thanatology, at extension 3685 for details.

Weekend Courses Announced by DOS

The School of Dental and Oral Surgery has announced continuing education courses for the present academic year. The one-day courses are scheduled Saturdays or Sundays for the convenience of practicing dentists, from 9:00 a.m. to 5:00 p.m. Those interested may call or write Dr. Robert Gottsagen, Director of Continuing Education, DOS, for details. His telephone and address are: 579-3865; School of Dental and Oral Surgery, 630 West 168th St., New York, N.Y. 10032 (DOS 7-208). Below is a summary of courses for 1975/76:

Nov. 8: Diagnosis of Diseases of the Mouth and Jaws of Interest to the General Practitioner—Dr. Edward Zegarelli and David Zegarelli
Nov. 8: Radiology for the Hygienist—Mrs. Patricia Morgan
Nov. 9: Ceramo-Metal Restorations: the Current State of the Art—Dr. Joel Goldin
Nov. 9: Disorders of the Temporomandibular Joints (Facial Pain): Diagnosis and Treatment—Dr. Joseph Marbach
Nov. 15: Drug Use in Everyday Dental Practice—Dr. Norman Kahn
Dec. 7: Endodontics for the Periodontally Involved Dentition—Dr. Joseph Leavitt
Jan. 10: Up-To-Date Restorative Dentistry: A Periodontally Oriented Approach to Fixed and Removable Prostheses—Dr. Alvin Grayson and John Lucca
Jan. 17: Occlusion, A Periodontist's View: Selective Grinding of the Natural Dentition as a Means of Modifying Occlusal Forces—Dr. Robert Gottsagen
Jan. 18: The Strategy of Diagnosis and Treatment Planning in Orthodontics—Dr. Sidney Horowitz and Henry Nahoum
Jan. 25: Porcelain Fused to Metal Restorations: Biological Requirements and Physical Properties—Dr. Burney Croll
Jan. 31: Clinical Pedodontics—Dr. Charles A. Sweet, Jr.
Feb. 1: Surgical Orthodontics: Diagnosis and Treatment Planning—Dr. Henry Nahoum, Sidney Horowitz and Andrew Linz
Feb. 7: Incorporating Preventive Dentistry into General Practice—Dr. Irwin Mandel, Daniel Fine and Robert Breakstone
Feb. 29: Restorative Management of the Mutilated Dentition—Dr. Jacob Abelson and Louis Rubins

Something Helpful Is Always Afoot When Dr. Rosenstein Visits Clinic

Feet are Dr. Bernard Rosenstein's beat. 30,000 pairs of them have tread through his professional life, and there hasn't been one he hasn't liked.

Dr. Rosenstein is a podiatrist who practices every Wednesday in the Arthritis Clinic on VC-10. He has worked voluntarily without payment here since he began these weekly jaunts to the Medical Center in the mid 1950's.

Dr. Rosenstein works closely with our rheumatologists to relieve the intense pain that an arthritis sufferer may have in his legs and feet. He sees mostly rheumatoid arthritis cases, but frequently works with scleroderma or lupus patients. His patients range from children to septuagenarians, with the mean falling in the fifties. The most common complaints are in the ankles, metatarsals and toes.

"The foot is probably one of the most complicated and challenging parts of the body," says the 50 year old Dr. Rosenstein. "In arthritis, the usually minor mechanical weaknesses are greatly exaggerated. Lack of joint motion creates a 'domino effect' on the other, smaller joints—which then no longer integrate their motions smoothly."

"Most surgeons try to minimize surgery on arthritic patients, because the disease interferes with proper mechanical stabilization. Therefore, the clinic has used a comprehensive nonsurgical approach with what it thinks are very good results."

In the clinic he may exercise the nonsurgical approach by prescribing corrective shoes. Most of us think of them as



The foot is "one of the most complicated and challenging parts of the body," and Dr. Rosenstein is up to the challenge.

being invariably heavy and rigid, but Dr. Rosenstein finds value in the soft, accommodative style of shoe. He performs supportive work, injection therapy for muscle spasms, and minor surgical treatment, usually on the toes. For major reconstructive work he will refer the patient to an orthopedist.

Dr. Rosenstein usually sees a new patient weekly, then monthly, then eventually after longer intervals, when necessary. "It is gratifying to know that the majority of patients walk out with more comfort and relief," he says. In addition to skillful hands, he possesses enough jovialness and gentle humor to brighten any patient's visit.

He was graduated from New York University in 1943 and from the Long Island College of Podiatry (cum laude) in 1950. He lives in Scarsdale with his wife, Pearl, and his children, Iris and Jeffrey.

FIRE SAFETY: II

Last month, we discussed what to do in case fire breaks out in employee areas. This month, we'll review the safety procedures for fire emergency in patient areas.

To remove all people as quickly as possible from the area, the order of patient evacuation is ambulatory patients, semi-ambulatory patients, bed patients.

Evacuate patients by:

1. Leading ambulatory patients to safety.
2. Using a wheelchair for semi-ambulatory patients. Or two people can assist one patient.
3. Wheeling the bed out of the room.
4. Carrying the patient—by one, two, or three people as necessary

If need be, one small person can help a patient off the bed onto the floor. Place one arm around the patient's back, under the arms. Slip the legs off the side of the bed and gradually slip the patient to the floor. Roll him or her onto a blanket, or sheet, and drag out of the room to a safe area.

If there is smoke, keep everyone as close to the floor as possible as you make your way.

To get to a safe area:

1. Move on the same floor to a connecting building, beyond the corridor fire door.
2. If this is not possible, go down, not up. (Smoke and heat like to go up.)
3. Use the stairs. Elevators might become traps.

Hopefully, we will never have to put these rules into action, either in patient or employee areas. But if an emergency should strike, a well-prepared worker will often be as valuable to the hospital as a full-time fire-battler.

You've Got to Have Heart: Dr. Zegarelli The Fourth Shows He's Worthy of Name

If you know the Medical Center, you probably know of three Dr. Zegarellis, whose fields are in dentistry and pathology. But did you know that there is a fourth Dr. Zegarelli? His fields include Aqueduct, Belmont and Saratoga, and unlike the first three Dr. Zegarellis, he never has any objection to sugar. In fact, give him a lump to nibble, and you'll become friends very quickly.

The first Dr. Zegarelli, friends of the Medical Center know, is Dr. Edward V. Zegarelli, Director of Dental Service, PH, and Dean of the School of Dental and Oral Surgery. The second is his son, Dr. David J. Zegarelli, Assistant Attending Dental Surgeon, PH, Assistant Professor of Dentistry, DOS, and Assistant Professor of Pathology, P&S. The third is David's wife, Dr. Elena Zegarelli-Schmidt, instructor in Pathology, P&S.

The fourth Dr. Zegarelli currently on the scene has no formal first name. He is a beautiful thoroughbred race horse.

Dr. Edward Zegarelli tells his saga like this:

"My good and close friend Dr. Dominick DeLuke, a 1944 graduate of DOS and a fine oral surgeon, has a horsebreeding farm in the Adirondacks.

"About four years ago he invited me up and asked if he could name a horse 'Dr. Zegarelli' when a really good one, as he put it, came along." Three years ago, the proud bearer of that name was born.

A Modest Mudder

Dr. Zegarelli the colt grew to stallionhood, and soon the time came for his first race. Dr. Edward Zegarelli and his wife went up to Saratoga as guests of the DeLukes to witness the historic event.

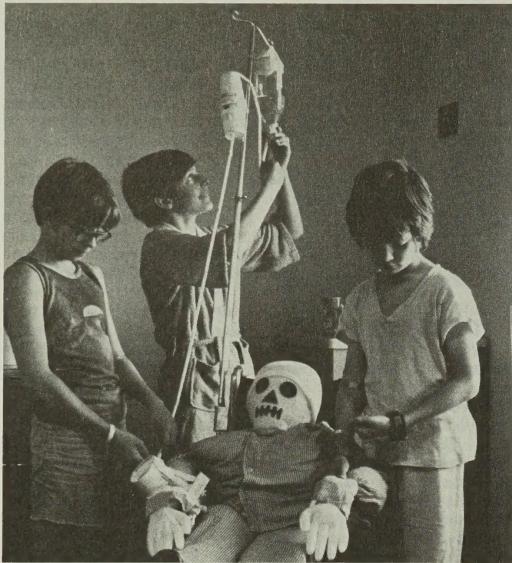
Their hearts sank.

"It was pouring rain—and the mud must have been a foot thick along the track!" But the four-legged namesake proved



Present at meeting of the fourth Dr. Zegarelli and the first Dr. Zegarelli are, from left, Dr. Dominick DeLuke, Dr. and Mrs. Edward V. Zegarelli, Mrs. DeLuke, and S. DiMauro, trainer. J. Velasquez provided the winning combination in a time for six furlongs of 1:10.4.

Patient with Halloween Syndrome Cured of Moans and Groans Here



Hm, for someone suffering from trianglonostria, zipperodontia and circulophthalmia, his pulse is remarkably stable, thinks Dr. John Botti (right) as his fellow physicians for the day, from left, Drs. Nicholas Sepcich and John McGuire, adjust vital life support lines. And if you didn't have your fun trick—and mainly—treating this Allhallow's Eve just past, take a page from these three young patients who cooked up a diagnostic conundrum on their day of discharge. Incidentally, the patient's moans and groans turned out to be the underlying cause after all, as surgical investigation revealed a small tape recorder hidden in his chest cavity.

Bard Hall Players Announce...

The Bard Hall Players will present "Pajama Game" November 20 to 23 at 8:00 p.m. at the Bard Hall Lounge, 50 Haven Avenue.

For ticket information please call Johanna Farley, Executive Secretary of the P&S Club, at 781-7160.

Bard Hall Players is an activity of the P&S Club, an organization of Columbia medical students founded more than 80 years ago by James R. Mott.

The P&S Club is more than a social group. Some of its more notable philanthropic undertakings include fund raising in 1917 to purchase a steam launch for Sir William Grenfell, the famed Labrador physician, who used it to deliver health care to Eskimos and Indians on isolated islands along the Labrador coast. In the late 1960's, the P&S Club helped bring medical aid to thousands of Biafran children.

New Lecture Series Begins at P&S

The death from acute toxic encephalopathy on Sept. 29, 1973 of seven-year-old Andrew Mark Lippard, son of Columbia University chemistry Professor and Mrs. Stephen J. Lippard, has led to the establishment of a series of lectures designed to encourage research on encephalopathic diseases. (These are little understood, nearly always fatal diseases of the brain, which include mosquito-borne viralencephalitis.)

The first of the Andrew Mark Lippard Memorial Lectures, which will be held annually, was given on September 25 in the Alumni Auditorium by the noted pediatrician and neurologist Dr. Philip R. Dodge. He gave an overview of his experience with encephalopathic diseases in children.

The lecture series is the result of efforts by family, friends, and colleagues of Pro-

fessor and Mrs. Lippard to express their sympathy by helping to further the study of these diseases. The lectures are supported by the Andrew Mark Lippard Memorial Fund, the M.D.-Ph.D. Program of the Graduate Biomedical Sciences Advisory Committee and the Department of Neurology.

STETHOSCOPIA

Continued from page eight

• CONDOLENCES TO

The family and friends of Mrs. Ethel Brown, Neurological Institute Tray Room, who died on September 15 at the age of 42. She had been with the hospital for 18 years.

She is survived by her husband, George, and five sisters and two brothers. One sister, Mrs. Almarie Jones, is employed in the Presbyterian Hospital Food Service.

In her memory, Mrs. Brown's friends and co-workers have made contributions that will be used in a new cancer research fund at Presbyterian Hospital.

Mrs. Jean Dutkus on the death of her husband, Paul, on September 15. Mrs. Dutkus is secretary to Dr. James A. Wolff, Director of Pediatric Hematology-Oncology, PH.

Prostaglandin Advances Net Horwitz Prize

Sune Bergstrom and Bengt Samuelsson, physiological chemists at Sweden's Karolinska Institutet, received Columbia University's 1975 Louisa Gross Horwitz Prize last month for outstanding research in biochemistry.

The prize's \$25,000 award recognizes the scientists' "pioneering investigations on the prostaglandins," efforts which have "led the way to the development of a whole new field in biology and biochemistry." Prostaglandins are hormone-like regulators of many body functions and are potential agents in the treatment of a wide range of illnesses.

The Horwitz prize committee credited Professors Bergstrom and Samuelsson with isolating and identifying the prostaglandins, determining the pathways of their metabolism, and, making key observations on "the mechanism of their biosynthesis and in their physiologic and clinical significance."

Immense Potential

The prostaglandins constitute a closely related family of highly potent and versatile substances present in most human body tissues. Inside the cell membrane they function as chemical switches, allowing certain messages to pass into the cell's interior and blocking others out.

Because of their crucial role in biological regulation, the prostaglandins have immense untapped potential in the treatment of many illnesses, including asthma, high blood pressure, arthritis, glaucoma and stroke. Potent mediators of reproductive processes as well, they are being employed as birth-control drugs, abortion agents and labor inducers.

The effect of prostaglandins on human tissue was originally observed at P&S during the 1930's. Columbia gynecologists Raphael Kurzrok and Charles Lieb found that an unidentified component of semen caused uterine tissue to relax or contract depending on whether a woman was fertile or sterile.

"A Milestone Feat"

Little else was learned about these mysterious substances until the 1950's when Professor Bergstrom and his colleagues at Karolinska first iso-

lated two members of the prostaglandin family from frozen sheep vesicular glands. Soon afterward, the two Horwitz Prize winners used a blend of new analytic techniques to unravel the prostaglandins' chemical structures and to demonstrate how they are made in nature. The prize committee called these pioneering investigations "a milestonefeat in biochemistry."

Furthermore, by demonstrating that the prostaglandins are biosynthesized from essential fatty acids, the two scientists paved the way to artificial production of the scarce and expensive substances in quantities large enough for world wide distribution to scientists for studies of their own.

The committee noted that "these findings were the first to suggest a biochemical basis

for the effects of essential fatty acids in the diet."

During the past decade, Professors Bergstrom and Samuelsson have mapped the metabolic pathways of prostaglandins in animals and humans, focusing on the effects of prostaglandins on blood pressure, fat metabolism, and reproduction.

The Louisa Gross Horwitz Prize was established under the will of the late S. Gross Horwitz in memory of his mother to honor scientific investigators whose contributions to knowledge in biology and biochemistry have been outstanding.

The first prize was awarded in 1967 to Professor Luis F. Leloir, the Argentine biochemist who won the Nobel Prize in chemistry in 1970. Last year's award went to French geneticist Boris Ephrussi.

A Salute to Beautiful Activists

The dictionary defines "activist" as someone who stresses a vigorous course of action. We think of such a person as forceful and energetic. Add the word "beautiful"—

And you've got an unbeatable combination!

Two Presbyterian Hospital volunteers, Mmes. Ralph H. Boots and Frieda Dankwerth are winners of the 1975 Beautiful Activist Award. They were among 20 volunteer women honored for outstanding service to a hospital in New York City.

Mrs. Boots is a member of the PH Volunteer Department, and the Women's Auxiliary of the Presbyterian Hospital. She

received her award in the "Auxiliary" category and was nominated by her auxiliary chairman, Mrs. John VanB. Dean.

Mrs. Dankwerth is a member of the PH Volunteer Department. An awardee in the "Volunteer" category, she was nominated by Mrs. Dorothy Diamond, Director of Presbyterian Hospital Volunteers.

The winners were feted at an October 3 luncheon at the Plaza Hotel, where they received silver plaques with their initials and the words, "Beautiful Activist for 1975."

The awards were sponsored by the Germaine Monteil Cosmetics Corporation.



Mrs. Frieda Dankwerth, in her "natural habitat."



Mrs. Ralph H. Boots (left) chats with Mrs. Malcolm McAllister in Stuyvesant Thrift Shop.

Drs. Fleiss and Wolfe Named Division Heads And Full Professors

Dr. Joseph L. Fleiss, nationally recognized biostatistician, and Dr. Samuel Wolfe, outstanding administrator, researcher and educator in public health and community medicine, were appointed full professors and heads of divisions in the Columbia University School of Public Health. The announcement, by Dr. Donald F. Tapley, Dean of P&S, named Dr. Fleiss Professor of Public Health and Head of the Division of Biostatistics and Dr. Wolfe Professor of Public Health and Head of the Division of Health Administration.

Dr. Fleiss was a 1959 cum laude graduate of Columbia College and received his Ph.D. in mathematical statistics from Columbia University. He has been with the School of Public Health for 15 years and has been associated since 1958 with the Biometrics Research Unit of the New York State Department of Mental Hygiene, where he is now an Associate Research Scientist. He replaces Dr. John Fertig, division head for many years.

Dr. Wolfe received his M.D. degree from the University of Toronto and his Doctorate in Public Health from Columbia University in 1961. His career encompasses many areas of medical service including general family practice, public health administration, health care research and ambulatory care program administration. He served as Director of the Office of Comprehensive Health Programs of Meharry Medical College in Nashville, and for the past two years has been Professor of Community Medicine at the State University of New York at Stony Brook and Chairman of the Department of Community Medicine of Long Island Jewish-Hillside Medical Center. Dr. Wolfe is engaged in major studies, funded by the National Center for Health Sciences Research, to measure the effects of differing kinds of health care on outcomes of illness. He will succeed Dr. Lowell Bellin, now Commissioner of Health of New York City, as Head of the Division.

Cancer Institute Aide Retires

Mrs. Ida M. Fennar, executive secretary in the Institute of Cancer Research, CU, chose early retirement this fall after over 23 years of service.

Mrs. Fennar joined the University in June 1952 as secretary to Dr. Alfred Gelhorn, then director of the Institute. In 1969 she became secretary to James S. Quirk, the Institute's Deputy Director.

Mrs. Fennar lives in Englewood, New Jersey. She has three children and is the grandmother of two. Her plans

for the future include extensive traveling with her husband, Albertus.



Mrs. Ida Fennar

Frank Vaccarelli Receives Promotion to Head Gardener

Frank Vaccarelli was recently promoted to head gardener of Presbyterian Hospital.

He joined the Maintenance Department 15 years ago as a groundsman, and later became assistant gardener. He took classes on exterior landscaping at the Bronx Botanical Gardens, but admits his best lessons in coaxing a canna up from the earth and trimming a linden tree came from practical experience.

Mr. Vaccarelli and his staff maintain the beauty of the extensive Medical Center gardens. They take the windiness of Washington Heights into consideration, working practicality into the design. They choose short, stocky specimens such as begonias and vinca plants, and shield them with attractive hedges.

A recent beautifying project

the staff has undertaken has been the planting of ground cover on the 165th Street bank of Atchley Pavilion. Next spring, the covering of crown vetch will bloom into pink flowers over the pipes installed for the Medical Center's new air conditioning system.

Mr. Vaccarelli and his men are also responsible for keeping the parking garage and sidewalks attractive and clean.

Mr. Vaccarelli lives in Iselin, New Jersey, and has his own garden. He and his wife, Nickie, have two children, Margie and John.

He's a painter whose impressionist works have graced the famed Washington Square Art Exhibits. An avid fisherman, he enjoys going on fluke and bluefish expeditions on a motorboat he won at this year's Asbury Park Boat Show.

DOINGS OF DOCTORS

Continued from page eight

Physician, PH, and Associate in Clinical Medicine, P&S, attended the Second NATO Advanced Study Institute on the Biliary System, in Aalborg, Denmark, and the Second International Gstaad Symposium on the Liver, in Gstaad, Switzerland.

At the Nato Institute Dr. Stanley E. Bradley chaired an opening session on Membranes and Transport Mechanisms. At the Gstaad Symposium he chaired a session on Quantification of Hepatic Blood Flow and Uptake and presented a paper *Bioelectric Potentials in Canalicular Bile Formation in the Rat*.

Following these meetings the Drs. Bradley visited Professors Jules Stahl and Frédéric Stephan (both former Fellows in Medicine at Presbyterian Hospital) at the Hôpices Civils and the University of Strasbourg in France to discuss collaborative studies now in progress.

Dr. Guy D. Potter, Attending Radiologist, PH, and Professor of Radiology, P&S, lectured on *Radiology of the Sinuses* at the George Washington University Medical Center in Washington, D.C.

He was also guest speaker at the meeting of the Washington, D.C. Chapter of the American College of Radiology on *The Opacified Sinus: Tumor or Infection*.

He spoke on *Tomography of the Ear* during a seminar-workshop at the University of Wisconsin Center for Health Sciences, in Madison.

Dr. Sol Spiegelman, University Professor and Director, Institute of Cancer Research, CU, presented an invited paper, *Evidence for RNA Tumor Viruses in Human Cancer*, at the Fourth Scandinavian Virus Symposium in Oslo, Norway.

He delivered the opening plenary lecture, *A Molecular Approach to the Etiology of Human Cancer*, at the 25th International Congress of Pure and Applied Chemistry, held in Jerusalem.

Dr. Irving J. Naidorf, Associate Attending Dental Surgeon, PH, and Assistant Dean for Postgraduate Education, DOS, has been appointed consultant to the Council on Dental Education and reappointed to the Hospital Dental Services Committee on Accreditation by the board of trustees of the American Dental Association.

Dr. John F. O'Connor, Associate Attending Psychiatrist, PH, and Associate Clinical Professor of Psychiatry, P&S, recently was course director of the first postgraduate program on human sexuality given at the Medical Center.

Dr. Joe G. Hollyfield, Associate Professor of Anatomy in Ophthalmology, P&S, received a Research Career Development Award from the National Institutes of Health, National Eye Institute.

Dr. Hollyfield recently participated in the National Retinitis Pigmentosa Foundation Workshop held at the Endicott House, Dedham, Massachusetts. At the Third Symposium on the Structure of the Eye held in Japan, he delivered a paper, *Comparative Studies on the Phagocytic Capability of the Pigment Epithelium*. At a symposium at the National Eye Institute, NIH, in Bethesda, Maryland, he spoke on *The Phagocytic Role of the Pigment Epithelium*. At a symposium sponsored by Temple University, Philadelphia, Pennsylvania, he discussed *Interactions between the Retina and Pigment Epithelium during Development Necessary for Photoreceptor Outer Segment Differentiation*.

Dr. Alan R. Shalita was named associate professor and head of the division of dermatology in the department of medicine of Downstate Medical Center last month. He was formerly Assistant Attending Dermatologist, PH, and Assistant Professor of Dermatology, P&S.

Dr. James S. Todd, Assistant Surgeon, PH, and Instructor in Surgery, P&S, has been elected chairman of the board of trustees of the

Medical Society of New Jersey. He is also currently president of the Bergen Regional Community Blood Bank, and spokesman on National Health Insurance for the American Medical Association. In this latter capacity Dr. Todd has appeared on numerous panels and television interview programs both on the East and West coasts.

Dr. Robert Gottsegen, Attending Dental Surgeon, PH, Professor of Dentistry and Director of Periodontics and Continuing Education, DOS, presented a program on "Success or Failure in Periodontal Therapy: a Retrospective Assessment" at the annual meeting of the American Academy of Periodontology in Minneapolis.

He also served as consultant in dentistry to the National Commission on Diabetes.

Currently Dr. Gottsegen is chairman of the Periodontal Advisory Committee to the Commission on Accreditation of the American Dental Association.



Dr. Robert Gottsegen



Dr. Harold Speert

Dr. Harold Speert, Assistant Attending Obstetrician and Gynecologist, PH, and Assistant Professor, Clinical Obstetrics and Gynecology, P&S, presented *Cesarean Section: A Pictorial History* at the fall meeting of the New Hampshire section, American College of Obstetricians and Gynecologists and the New Hampshire OB-GYN Society.

Dr. Barbara W. Low, Professor of Biochemistry, P&S, has been invited to attend the Jubilee Celebration of the 50th Anniversary of the Japanese Biochemical Society in Tokyo in November and to present a paper in one of the symposia. She then intends to spend some time working on the snake venom neurotoxins with Professor Nobuo Tamiya at Tohoku University at the invitation of the Japan Society for the Promotion of Science under their visiting professorship program.

Dr. Harry Seneca, Associate Attending Urologist, PH, and Associate Professor of Urology, P&S, received the 1975 Hugh Hampton Young Award at the American Urological Association convention in Miami Beach, Florida.

Dr. Andre F. Cournand, Consultant in Medicine, PH, Professor Emeritus and Special Lecturer in Medicine, P&S, was one of 35 Nobel Laureates scheduled to discuss *The Future of Science* at the Eleventh Annual Nobel Conference at Gustavus Adolphus College, St. Peter, Minnesota.

Dr. Donald Kornfeld, Attending Psychiatrist, PH, and Professor of Clinical Psychiatry, P&S, and Stanley Heller, Assistant Attending Psychiatrist, PH, and Assistant Professor of Clinical Psychiatry, P&S, participated in the National Invitational Conference on Emotional Stress and Heart Disease held at Myrtle Beach, South Carolina.

Dr. Welton M. Gersony, Attending Pediatrician and Director of the Division of Pediatric Cardiology, PH, and Professor of Pediatrics, P&S, was an invited participant at an International Symposium on Reconstruction of the Right Heart, in Bergamo, Italy.

As visiting professor, Dr. Gersony later lectured at the Universitäts-Frauenklinik in Zurich, Switzerland; and in London, England at the Cardio-thoracic Institute, and Great Ormond Street Hospital for Sick Children.

